

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Hillary for America

**A. Full Name (Last, First, Middle Initial)**

Adam Gillund

Mailing Address 1531 Dickson Dr

City	State	Zip Code
Hendricks	MN	56136-4100

FEC ID number of contributing federal political committee.

C

Name of Employer  
UnitedHealthcare

Occupation  
Health Insurance

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.62

**Transaction ID : C320171**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Receipt this Period

104.95

**B. Full Name (Last, First, Middle Initial)**

Gustav Seelbinder

Mailing Address PO Box 108  
Usa

City	State	Zip Code
Rhinebeck	NY	12572-0108

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Real Estate

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : C201491**

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		05		2015

Amount of Each Receipt this Period

2700.00

**C. Full Name (Last, First, Middle Initial)**

Nakin Nolasco

Mailing Address 1044 Hampton Cir

City	State	Zip Code
Naples	FL	34105-4821

FEC ID number of contributing federal political committee.

C

Name of Employer  
Nolasco Chiropractic, PA

Occupation  
Chiropractic Physician

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

**Transaction ID : C158561**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		22		2015

Amount of Each Receipt this Period

1000.00

**Subtotal Of Receipts This Page (optional)**.....

3804.95

**Total This Period (last page this line number only)**.....